

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL To Commissioner For Patents Please enter the following submission and withdraw the finality of the proceeding office action or withdraw any pending appeal and reopen prosecution before the Examiner.	Application Number	09/808,002
	Filing Date	March 15, 2001
	First Named Inventor	Robert Stanley Arling
	Group Art Unit	3626
	Examiner Name	Bleck
	Attorney Docket Number	US010387

This is an RCE under 37 C.F.R. § 1.114 of the above-identified application (which is made prior to: payment of issue fee; abandonment; notice of appeal to the CAFC; or commencement of civil action under 35 U.S.C. 145 or 148.)

1. **Submission required under 37 C.F.R. § 1.114**

a. ☒ Previously submitted

i. ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 filed today, October 31, 2005.
 (Any unentered amendment(s) referred to above will be entered).

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

iii. ☐ Other _____

b. ☐ Enclosed

i. ☐ Amendment/Reply

ii. ☐ Affidavit(s)/Declaration(s)

iii. ☐ Information Disclosure Statement (IDS)

iv. ☐ Other _____ (may not be a brief)

2. **Miscellaneous**

a. ☐ Suspension of action: on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (May not exceed 3 months; Fee required per 37 C.F.R. § 1.117(i))

b. ☐ Other _____

3. **Fees**

a. ☒ The Commissioner For Patents is hereby authorized to charge all required fees except the issue fee or credit any overpayments, to Deposit Account No. 4-1270.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print Type)	JOHN VODOPIA	Registration No. (Attorney/Agent)	36,299
Signature		Date	31 October 2005

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Alexandria, VA 22315-1450, or facsimile transmitted to the U.S. Patent and Trademark Office fax: 703 872 9306 on the date below:

Name (Print Type) JF Vodopla

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